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Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)									
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	27b		28a		28b		28c		29

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP F	OR PRESIDENT, INC.		
Full Name (Last, First, Middle Ini A. TRUMP TOWER COM	Date of Disbursement		
Mailing Address PO BOX 1926			12 31 / 2015
City HICKSVILLE	State Zip Code NY 11802		Transaction ID : SB23.150584.0
Purpose of Disbursement PRE-PAID PAYROLL		101	Amount of Each Disbursement this Period
Candidate Name	Disbursement For:	Category/ Type	2426.63
Office Sought: House Senate President State: District:	Primary General		[MEMO ITEM]
Full Name (Last, First, Middle Ini	tial)		
B. KEITH SCHILLER			Date of Disbursement
Mailing Address 725 5TH AVENI	UE .		12 31 2015
City NEW YORK	State Zip Code NY 10022		Transaction ID : SB23.150584.1
Purpose of Disbursement PRE-PAID PAYROLL		101	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	2426.63
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		[MEMO ITEM]
Full Name (Last, First, Middle Ini	tial)		
c. TRUMP CAFE	,		Date of Disbursement
Mailing Address 725 5TH AVENU	JE		08 18 2015
City NEW YORK	State Zip Code NY 10022		Transaction ID : SB23.255498
Purpose of Disbursement MEETING EXPENSE: MEALS [A	Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	9.00
Office Sought: House Senate President State: District:	Disbursement For: 2016 X Primary General Other (specify)		[MEMO ITEM]
	age (optional)		0.00
·	this line number only))		